

start a contract by January 1, that contract had to be negotiated and signed by that date. Every April 15, my western Pennsylvania bosses and I have to make sure that all of our tax forms are filed on time. And on the first day of school, my neighbors and I make sure our kids are ready to start the year. And every year on May 27, I better remember that that is the anniversary that the best girl in the world and I exchanged wedding rings.

Getting things done on time is important. It is a value we teach our children.

Mr. Speaker, there is an annual deadline that the House and Senate have failed to meet with embarrassing frequency. The United States of America operates on fiscal years that begin on October 1 and end on September 30. Congress and the President are responsible for enacting the annual appropriations bills before each new fiscal year starts. That is how it is supposed to work. Unfortunately, Congress, led by both parties, has only finished its work on all regular appropriations bills before this deadline four times since 1977. That is simply unacceptable.

Twenty-six years ago, the President of the United States delivered a State of the Union address from the podium just over my right shoulder. During that address, Ronald Reagan noted that the government had just completed another broken and inefficient appropriations season:

In 7 years of 91 appropriations bills scheduled to arrive on my desk by a certain date, only 10 made it on time. Last year, of the 13 appropriations bills due by October, none of them made it. Instead, we had four continuing resolutions lasting 41 days, then 36 days, and 2 days, and 3 days.

President Reagan then held up three stacks of paper totaling 45 pounds which authorized the spending of hundreds of billions of taxpayer dollars and reminded the Congress that it had only 3 hours to review the documents. After recounting this dysfunctional history, President Reagan pleaded:

Congress shouldn't send another one of these.

Some may argue that the process is not important; it is the policy that matters. Mr. Speaker, process is important because it is inside the process that policy happens.

Our Constitution gives Congress the power to tax and spend. Exercising this spending power requires due deliberation and should allow for individual Members, on both sides of the aisle, to challenge expenditures, including whether any particular expenditure is too much, too little, or should be made at all. Those challenges should come in the form of amendments that would be debated on this House floor. It is the process by which the people of this country have the opportunity to have a say in how their hard-earned tax dollars are spent.

More than 3 months into the fiscal year, we are now heading toward the vote on what is known as an omnibus.

This bill collapses all 12 regular appropriations bills into a single behemoth. We are at this point today because the House and Senate did not complete the regular appropriations process on time. Instead of voting 12 times on individual appropriations bills and hundreds of times on amendments to those bills, Members of this House will only vote once. Under this arrangement, important and necessary spending is held hostage to questionable and wasteful spending.

Last year, the House only passed four spending bills on time, and the Senate passed none. This must stop. Congress must get its work done on time.

Today, I am introducing the Congressional Pay for Performance Act of 2014. This simple bill would hold Congress accountable and force us to comply with deadlines, just like people in the real world do outside of Washington, D.C.

This is how it would work: each House of Congress must pass a budget resolution by April 15 or have its pay withheld. Then, each House of Congress must pass all 12 appropriations bills by July 31 or have its pay withheld. It would then have 2 months to reconcile the bills between the two Houses.

If Congress is not performing its core constitutional duties in a timely manner, it should not get paid until its work is done. Let this year's omnibus be the last one, for Congress shouldn't send another one of these to the President.

THE COSTLY PROBLEM OF HUNGER

The SPEAKER pro tempore. The Chair recognizes the gentleman from Massachusetts (Mr. MCGOVERN) for 5 minutes.

Mr. MCGOVERN. Mr. Speaker, we live in the richest country in the history of the world, and yet hunger is a problem in the United States of America—a very costly problem. A recent report published in the journal “Health Affairs” shows that poor people are getting sick because they are running out of food at the end of the month. Hunger increases the likelihood that people will get other ailments. Specifically, this analysis shows that poverty and exhausted food budgets may be a reason for increased health risk due to dangerously low blood sugar. We know that poor families prioritize which bills they pay and that food—grocery bills—often fall behind other responsibilities like rent and utilities.

I will include for the RECORD an article from The New York Times entitled “Study Ties Diabetic Crises to Dip in Food Budgets.”

Mr. Speaker, this year marks the 50th anniversary of the war on poverty. One of the programs that is key in this war on poverty—in our attempts to reduce and eliminate income inequality—is the Supplemental Nutrition Assistance Act, or SNAP—formerly known as food stamps. SNAP is a life-

line for 47 million Americans; 47 million of our fellow citizens rely on this program to help put food on the table for their families. But SNAP has become a major target in this Congress by those who believe it is simply a government handout.

SNAP is many things, but it is not a poorly run government handout. To the contrary, it is a program that is among the most efficient and effective, if not the most efficient and effective, of Federal programs. Despite this fact and despite the fact that millions of Americans turn to SNAP precisely because they saw their incomes drop or disappear because of the recession, SNAP was cut by \$11 billion on November 1, 2013. And on top of that, we are told that the farm bill that is still in negotiation would cut another \$8.5 billion to \$9 billion above that November 1 cut.

These cuts have real impacts. Some families who already saw a cut of \$30 a month on November 1 will see their SNAP benefit cut by another \$90 a month if the farm bill passes with these cuts. That is a cut of \$120 a month for a family of three in a State like California or Massachusetts or New York, for example.

According to a study conducted by the Robert Wood Johnson Foundation and the Pew Charitable Trust, a cut of \$2 billion a year in food stamps could trigger an increase in \$15 billion in medical costs for diabetes over the next decade. The insistence of many in this Congress—Republicans, and I'm sad to say some Democrats—that SNAP be cut, will have serious, long-term impacts on the health of poor people who are just trying to get by, and any cuts will cost us more. They will save us nothing.

Being poor is hard. It is expensive. We shouldn't be making the lives of those who struggle with poverty even harder by cutting safety net programs like SNAP. We should not be making poor people sicker because we want to cut Federal spending on SNAP while increasing spending for the Defense Department or giving corporate welfare in the form of crop insurance or other farm subsidies. Many of these excesses are contained in the farm bill that we may see in the next couple of weeks.

I oppose the SNAP cuts included in the farm bill. They are misguided, they are hurtful, and they are wrong. They will do real damage to real people who just want to earn a paycheck and provide for their families. I urge my colleagues to stand with me and oppose this farm bill if, in fact, it contains these \$8 billion to \$9 billion in cuts in SNAP. I would remind my colleagues that behind all these numbers and behind all the statistics and behind all the rhetoric, there are real people.

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These cuts that have already been made actually hurt people. Let's not pile on. Antihunger advocates have warned that further cuts to SNAP will

increase hunger in America. Go to any food bank in America; they are at capacity right now. Leading economists have told us that further cuts to SNAP will undermine the economy. SNAP is actually a stimulus. People who get SNAP have to spend it on food, and it helps our economy grow. Doctors and medical researchers have documented time and time again with a gazillion studies that further cuts to SNAP will cause avoidable health care costs to millions of our fellow citizens.

Sometimes I wonder when we have these debates is if anybody is paying attention. My question to this Congress is: Is anybody listening? Why would anybody cut this program more and more and more and more? Why are so many in this Chamber so indifferent to this problem that affects close to 50 million of our fellow citizens?

I plead with my colleagues to say “no” to any further SNAP cuts, and I appeal to this administration to work with Congress to develop a plan so that nobody in this country goes hungry. The silence on this issue in this Congress and in this administration is sad, and it is a missed opportunity to do something meaningful and positive for millions of our fellow citizens. We can do more. We can do better. We can end hunger now, but not by coldly, callously, and arbitrarily cutting SNAP.

[From the New York Times, Jan. 6, 2014]

STUDY TIES DIABETIC CRISES TO DIP IN FOOD BUDGETS

(By Sabrina Tavernise)

Poor people with diabetes are significantly more likely to go to the hospital for dangerously low blood sugar at the end of the month when food budgets are tight than at the beginning of the month, a new study has found.

Researchers found no increase in such hospitalizations among higher-income people for the condition known as hypoglycemia, suggesting that poverty and exhausted food budgets may be a reason for the increased health risk.

Hypoglycemia occurs when people with diabetes have not had enough to eat, but continue taking medications for the disease. To control diabetes, patients need to keep their blood sugar within a narrow band. Levels that are too low or too high (known as hyperglycemia) can be dangerous.

Researchers found a clear pattern among low-income people: Hospital admissions for hypoglycemia were 27 percent higher at the end of the month than at the beginning. Researchers said they could not prove that the patients' economic circumstances were the reason for the admission, but the two things were highly correlated.

The study, published online Monday in the journal *Health Affairs*, comes as Congress continues to debate legislation that includes the food stamp program for poor Americans. House Republicans are advocating \$40 billion in cuts to the program, a step that Democrats oppose.

About 25 million Americans, or 8 percent of the population, have diabetes, according to the Centers for Disease Control and Prevention. The poor are disproportionately affected. The United States spends more than \$100 billion a year treating people with the disease, the agency estimates.

Researchers from the University of California, San Francisco, matched hospital dis-

charge records from 2000 to 2008 on more than two million people in California with those patients' ZIP codes. People living in the poorest ZIP codes, where average annual household income was below \$31,000, were counted as low income.

The researchers then examined cases of patients admitted for hypoglycemia. The symptoms include dizziness, sweating or nausea. In rare cases, hypoglycemia can cause death.

For each 100,000 admissions of poor people, about 270 of them were given a primary diagnosis of hypoglycemia, more than the 200 per 100,000 among people of higher incomes. Dr. Hilary Seligman, assistant professor of medicine at U.C.S.F., and the study's lead author, said the difference was statistically significant.

Dr. Seligman said that she and her colleagues, aware of the debate about food stamps, sought to document whether running out of food stamps or money to buy food at the end of the month damaged people's health. Previous research had already established that people often give a higher priority to paying monthly bills for rent or utilities, for example, than to buying food, which is managed from day to day.

“People who work minimum wage jobs or live on benefits often have this typical pay cycle pattern,” Dr. Seligman said. “We wanted to examine whether there were adverse health consequences to running out of money at the end of the month.”

Sara Rosenbaum, a professor of health law and policy at George Washington University who was not involved in the study, said the findings were persuasive.

“The patterns here are significant,” she said. “The researchers obviously can't say if food deprivation was the definitive triggering event, but the findings show a strong association between lack of food and adverse health consequences.”

BENGHAZI

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oklahoma (Mr. LANKFORD) for 5 minutes.

Mr. LANKFORD. Mr. Speaker, over the past months since September 11, 2012, we have learned a great deal about what happened in Benghazi that fateful night when Chris Stevens, Sean Smith, Glen Doherty, and Tyrone Woods were murdered in our facility. Their work to make the world safer and to build peaceful relationships was met with aggression and brutality.

While we have some answers, I grow weary of asking questions over and over again in hearings, letters, and on this floor to get some very basic answers for the families and the American people. Let me run some of those questions past us again.

It was known within the State Department at the highest levels that neither facility in Libya, the one in Tripoli or the one in Benghazi, met the minimum physical security standards set after our Embassy was attacked in Kenya in 1998. Who made the decision to put so many American diplomats in facilities that did not meet that standard? That same question was asked yesterday by a Senate committee intelligence report asking the same question. Who made the decision to put people in facilities we knew did not meet the minimum security standards?

The Embassy had access to additional military personnel for security and training. They had been there for a long time. The regional security officer and the Ambassador requested to keep the additional security on the ground. That request was denied in August 2012, and in September 2012 there was an attack on our facility, and we did not have the manpower to repel them. What was the reason for the decision to remove the existing security force from Libya and leave only a small security team there?

In fact, the security force was so small that when the Ambassador traveled in Tripoli, it took the entire security team just to travel with him. So for long stretches during the day, the other American diplomats were completely exposed; so exposed, the diplomats asked the security forces to train them how to use a gun so they could defend themselves in the moments when they were left with no defense.

In a country that has just gone through a brutal, long civil war and there was no strong central government or national police force, why were diplomats left to defend themselves in Tripoli?

Multiple intelligence reports from the CIA, the Ambassador, and the regional security officer all noted increasing violence in Benghazi and terrorist training camps nearby. There were more than 20 security incidents in that area in the previous month. Every other international facility in Benghazi closed in the previous year because of security risks. Their facility or personnel was attacked, and they made the determination, one of two things, either increase security or pull out. They chose to pull out. We had the same option; but, instead, we chose to stay and decrease our security. Who made that decision, and what information did they use to make that decision?

We have a joint operation called the Foreign Emergency Support Team to assist during and after State Department crises. They never mobilized that night because no one ever sent them. Apparently, they were too far away. They were stationed in the United States. Can someone tell me why we have a Foreign Emergency Support Team if they are not for events like this? What level of attack is required to mobilize that team? If they are too far away to make a difference, why are they stationed in America? We are not worried about our embassies in America being attacked. We spend millions of dollars training and equipping this team to apparently stand down during an emergency. Why?

On September 11, our American Embassy in Egypt was stormed about 6 local time. The mob climbed the walls and put up the al Qaeda flag. I would assume it is an event that would warrant some sort of status change in our military preparedness, but no one from the State Department requested a status change or increased preparedness.